

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: GAEDEKEN, Gralf et al.

Appl. No. : 09/751,882

Filed: December 29, 2000

Title : INTERFACE LINK LAYER DEVICE TO BUILD A

DISTRIBUTED NETWORK

Art Unit : 2667

Examiner: JONES, Prenell P.

745 Fifth Avenue New York, NY 10151

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Samuel S. Lee, Reg. No. 42,791

(Name of Applicant, Assignee or Registered Representative)

9-22-04

Date of Signature

AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of June 23, 2004, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2.

Amendments to the Claims are reflected in the listing of claims, which begins on page 3.

Remarks/Arguments begin on page 22.

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2667 PATENT 4/ 450117-02963

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INTERFACE LINK LAYER DEVICE TO BUILD A DISTRIBUTED NETWORK

Gralf GAEDEKEN et al.

Serial No.

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Art Unit

2667

MAIL STOP AMENDMENT COMMISSIONER FOR PATENTS Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below.

This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining	(3)	(4) Highest number	(5)	(6)	(7)
	after amendment		previously paid for	Present extra	Rate	Additional fee
Total claims	93	Minus	36 =	57 ×	\$18(9)	= \$1,026.00
Independent claims	8	Minus	3 =	5 ×	\$86(43)	= \$430.00
	<u> </u>		Total additional fee for this amendment			= \$1,456.00

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

This application contains a multiple dependent claim. The required fee of \$290 (\$145) has been previously paid \square , or is paid herewith \square .

This response is being filed within the month following the expiration of the term originally set therefor. This is a petition to request a <u>-month</u> extension of time. A check covering the cost of the petition is enclosed

A check in the amount of \$ 1,456.00.00 is attached, which covers the cost of additional claims and _____ -month petition for extension of time.

Charge \$_ to Deposit Account No. 50-0320.

Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Samuel S. Lee, Reg. No. 42,791

(Name of Applicant, Assignee or Registered Representative)

Signature

September 22, 2004

Date of Signature

FROMMER LAWRENCE & HAUG, LLP

Attorneys for Applicant(s)

Samuel 8. Lee, Reg. No. 42,791 for

By: William S. Frommer Reg. No25,506

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